

TOWN OF NORWOOD BOARD OF HEALTH



Commonwealth of Massachusetts

ESTABLISHMENT

APPLICATION FOR A PERMIT TO GIVE

VAPOR – SHOWER - POOL OR OTHER BATHS

SAUNA/SHOWER (MEN'S) - SAUNA/SHOWER (WOMEN'S)

APPLICATION FOR PERMIT FOR THE GIVING OR VAPOR, SHOWER, POOL OR OTHER BATHS CHAPTER 140, SECTION 51 OF THE GENERAL LAWS

DATE:		FED ID #/ SS#		
NAME OF ESTABLISHMENT:				
ADDRESS:	STREET			
TOWN	STA		ZIP	
BUSINESS TELEPHONE NO.:(_)			
EMERGENCY TELEPHONE NO.: <u>(</u>				
DESCRIPTION: <u>VAPOR</u>	SHOWER	<u>SAUNA</u>	POOLS	
CONTACT PERSON:				
ADDRESS:				
	STREET			
TOWN	STA	ATE		ZIP
	CELL:			